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DATE: 03/10/2005 ATTORNEY DOCKET NUMBER: 164031.01 (4934) PTO FACSIMILE NUMBER: (703) 872-9306
PLEASE DELIVER THIS FACSIMILE TO: Examiner R. Felver. BULG FACSIMILE IS BEING SENT BY: James J. Barta, Jr.
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Type of paper transmitted: Amendment B; Request for Continued
Examination transmittal
Applicant's Name: Souza et al.
Serial No. (Control No.): 10/003,338 Examiner: R. Perveen
Date: 10/31/2001 Art Unit: 2116 Confirmation No.: 2222
Application Title: SELECTIVE SUSPENSION OF BUS DEVICES
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PAGE 1/17 * RCVD AT 3/10/2005 3:19:30 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-1/3 * DNIS:8729306 * CSID:3145881357 * DURATION (mm-ss):04-26

MS#164031.01 (4934) PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Souza et al. Serial No. 10/003,338 Filed 10/31/2001 Confirmation No. 5199 For SELECTIVE SUSPENSION OF BUS DEVICES Art Unit 2116

Examiner R. Perveen

March 10, 2005

REQUEST FOR CONTINUED EXAMINATION TRANSMITTAL

COMMISSIONER FOR PATENTS P.O. BOX 1450 ALEXANDRIA, VIRGINIA 22313-1450

SIR:

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

1. REQUIRED SUBMISSION:

	a.[] F	i. [] Consider the amendment(s)/reply under 37 C.F.R. §1.116 previously filed on Consider the arguments in the Appeal Brief or Reply Brief previously filed on iii. [] Other
	ъ. [X]	Enclosed i. [X] Amendment/Reply ii. [] Affidavit(s)/Declaration(s) iii. [] Information Disclosure Statement iv. [] Other
2. N	MISCEL	LANEOUS 27
	a. []	Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; fee required)
	b.[]	Other

MS#164031.01 (4934) PATENT

- 3. FEES (Required when the RCE is filed)
 - a. [X] The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 19-1345. A duplicate copy of this sheet is enclosed for fee processing.

i.	[X]	RCE fee required under 37 C.F.R. 91.17(e)
ii.	ÌΪ	Extension of time tee
iii.	ìÌ	Extension of time fee Other

b. [] Check in the amount of \$_____ is enclosed. The Commissioner is hereby authorized to charge any underpayment or credit any overpayment to Deposit Account No. 19-1345.

Respectfully submitted,

James J. Barta, Jr., Reg. No. 47,409

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JJB/cjl